

**ABUSE, NEGLECT, AND EXPLOITATION
OF THE SENIOR POPULATION**

ADVANCED LEADERSHIP ISSUES IN EMS

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ABSTRACT

The increase in the elderly population has created new challenges to our Emergency Medical Services. In Dade County, Florida, the primary responsibility for recognizing and dealing with issues of abuse, neglect, and exploitation resides with the Department of Health and Rehabilitative Services (HRS). Along with HRS, the Fire Department needs to assist with recognizing abuse, neglect, and exploitation of the elderly. The system must be assessed to ensure that these victims receive the proper assistance.

The purpose of this research paper was to identify the elderly population and review what services are available to address their needs. This research paper employed a descriptive research methodology to address the following research questions:

1. Who are the elderly?
2. What are they vulnerable to?
3. What services and resources are available to the elderly population?
4. What role can the Fire Service provide in addressing the needs of the elderly?

In late 1996, the Coral Gables Fire Rescue Department was introduced into a project that was designed to provide a bridge or safety net for elders who are vulnerable to abuse, neglect or exploitation. The idea was to link the emergency medical services and essential community based social services. This joint relationship would identify vulnerable elders and intervene before a catastrophe occurred.

It is recognized that when EMS personnel respond to an emergency, their primary concern is the patient. In addition to the medical treatment, the crew could work towards identifying the home environment. If the patients are not in need of medical attention, but remain vulnerable to neglect, abuse

or exploitation, then the Fire Service must act on its findings.

A review of all closed Elder Link referrals from November 1997 to March 1998 was conducted. The data was generated from the Coral Gables Fire Rescue Department and all reporters were Fire Department employees.

It was found that ninety three (93%) of the patients were vulnerable to neglect. Seven percent (7%) were discovered to be exploited by a caregiver. Sixty percent (60%) of all patients had a partner living in the home. After the rescue crew completed the medical evaluations, 71% of the patients were left in the home environment.

It is incumbent that the Fire Service recognize the elderly as a customer. They should be integrated into the EMS protocols and procedures. It is recommended that the Fire Service establish a liaison for dealing with elderly issues. The Fire Service and a Senior Services Division could work together to build a coalition with corporate business in the community. These unique relationships could prevent the elderly population from being vulnerable to abuse, neglect, and exploitation.

TABLE OF CONTENTS

| | |
|-----------------------------------|-----|
| Abstract..... | i |
| Table of Contents..... | iii |
| Introduction | 1 |
| Background and Significance | 1 |
| Literature Review | 2 |
| Procedures | 13 |
| Assumption and Limitations | 14 |
| Results | 14 |
| Discussion | 16 |
| Recommendations | 17 |
| References..... | 21 |
| Appendix A..... | 23 |
| Appendix B | 25 |
| Appendix C | 27 |
| Appendix D | 29 |
| Appendix E | 32 |
| Appendix F..... | 34 |

INTRODUCTION

The increase in the elderly population has created new challenges to our Emergency Medical Services. In Dade County, Florida, the primary responsibility for recognizing and dealing with issues of abuse, neglect, and exploitation resides with the Department of Health and Rehabilitative Services (HRS). Along with HRS, the Fire Department needs to assist with recognizing abuse, neglect, and exploitation of the elderly. The system must be assessed to ensure that these victims receive the proper assistance.

The purpose of this research paper was to identify the elderly population and review what services are available to address their needs. This research paper employed a descriptive research methodology to address the following research questions:

1. Who are the elderly?
2. What are they vulnerable to?
3. What services and resources are available to the elderly population?
4. What role can the Fire Service provide in addressing the needs of the elderly?

BACKGROUND AND SIGNIFICANCE

The elderly population (persons 60 years and older) numbered 33.9 million in 1996. This number represented 12.8% of the U.S. population. In Dade County, Florida, the elderly population is currently estimated to be 372,000. (Division of Economic and Demographic Research of the Florida Legislature, August 1997). This increasing change in demographics places an increased workload on the Emergency Medical Services.

It is all too often that EMS crews receive a call for “person fell”. Rescue personnel arrive only to

find a frail, scared, but uninjured elderly person. Their only complaint may be that they are cold and unable to get off the floor. After being evaluated and assisted to a more comfortable location, the EMS crew says good-bye. Did they do enough for their customer/patient? What led to this situation and what will stop it from happening again?

“In the late 1970's the problem of elder abuse began to surface as a national concern. By early 1980's, the United States Congress, through its Select Committee on Aging, brought this issue to the forefront and enhanced public awareness of this problem. Elder abuse, neglect, and exploitation will be an even greater national problem in the next century.” (Treiber, 1995, page 16-17)

This research paper examines the problems associated with the elderly by researching their vulnerability, identifying their needs, and investigates what roles the Fire Service can play. This study specifically relates to topics presented in the Advanced Leadership Issues in Emergency Medical Services Program (ALIEMS). Customer Services is addressing the emotional in addition to the physical needs of our customers -- that is, providing extras beyond those necessary for medical care. (Advanced Leadership Issues in EMS, Student Manual, Feb. 1995, p. 3-2). As discussed in the ALIEMS Program, the customer defines quality of care. The Fire Service must identify the customer and focus on his or her needs.

LITERATURE REVIEW

For this research project, a literary investigation was conducted utilizing the resources of the Learning Research Center at the National Fire Academy, various fire and emergency medical services periodicals, Internet searches, newspaper archives, and local experts.

The information gathered and reviewed pertain to abuse of the elderly. Specific emphasis was placed on a needs assessment of people 60 years of age and older.

Elderly Profile

About one-fifth of Dade County's elderly have difficulty with at least one activity of daily living. Daily living consists of bathing, dressing, eating, using a toilet and getting in/out of bed or chair. Nearly one quarter have difficulty with at least one instrumental activity. Instrumental activities are taking medicines, caring for appearance, preparing meals, shopping for groceries/clothes, managing money, dialing/using the phone, doing laundry, other housework, and getting to places they need to go. Over one quarter report difficulty with mobility activities, such as walking and getting up/down stairs. (Condon, Dunlop, Rothman. June 1994, pp. X).

Elements

The elderly population which are or can be affected by abuse, neglect, or exploitation is considered to be "a person 60 years of age or older who is suffering from the infirmities of aging as manifested by advanced age or organic brain damage or other physical, mental, or emotional dysfunctioning to the extent that the ability of the person to provide adequately for the person's own care or protection is impaired." (Department of Elder Affairs (1996) p.2)

In Hillsborough County, Florida, the elderly population is larger than 16 individual states. (Getz,

1995, p.40).

The Journal of the American Medical Association (Clark, Oct., 1997, p. 1321) published a study that evaluated the effectiveness of preventive occupational therapy that were tailored for multi-ethnic independent- living older adults. This document identifies the number of Americans age 65 years or older has risen dramatically from 3.1 million in the early 1900's to over 33 million in 1995. In the year 2020, it is estimated that 17% of the American population will be elderly. If the increase in the elderly population continues along the current trends, it is expected that longer life spans will be marked by poorer health-related quality of life.

Dr. Dwayne Banks and Dr. Michael Fossel (JAMA, October 1997, p. 1345) state that because we can alter age-related diseases such as emphysema by smoking cessation “the underlying process of aging cannot itself be altered.” Every person’s life span is determined by factors that include lifestyle, socioeconomic status, diet, environmental conditions, and genetic traits.

The socio-demographic characteristic of area #8 (the City of Coral Gables) has a majority of the residents white, non-Hispanic (65.6%) with a Cuban sub-population of 24.7%. Two-thirds of this population spoke English only. The educational background of this area was found to be the highest percentage. Sixty-seven (67%) reported more than a high school education. Household income was also found to be the highest percentage in the county; 31.2% of the reported household’s incomes were \$70,000 or more. The majority were retired, and 30% reported to live alone. (Condon, Dunlop, Rothman, June 1994, pp. B33)

Vulnerability

The elderly population is often thought of as second class. The conception that it’s time to move

and stop utilizing resources is often perceived. The rescue call that resulted in assisting an elderly person off the floor is only the beginning. It is found that often these people can't take care of themselves. The Florida State Statutes lists the elements of the elderly population that are affected or could be affected by the problems of abuse, neglect, or exploitation. "Society treats dogs and animals, and protects them, better than we do some of our own elderly parents and grandparents." (Getz, 1995, p.40) "Elder Abuse - the phrase still sends shock waves among the majority of Americans. Most find it hard to believe how widespread and frequent this problem is," stated the late Claude Pepper, of the United States House of Representatives Select Committee on Aging. (Florida's Vulnerable Elder Rights Plan 1998, p. 2)

The Journal of Elder Abuse and Neglect, (1991, Volume 3, p.4), reports that nearly 5% of the nation's seniors may be victims of abuse and that elder abuse affects 1.5 million persons annually across the nation. The elderly population is the fastest growing segment of the population and most vulnerable to abuse, neglect, and exploitation.

The National Center on Elder Abuse describes elder abuse in five predominant types: Neglect, Exploitation, Physical and Psychological, and Violation of Rights. (Florida's Vulnerable Elder Rights Plan 1998, p.2)

It has been reported that public and professional awareness is one of the most effective factors in identifying elder abuse. (Florida's Vulnerable Elder Rights Plan, 1998 p.2). The awareness level about elder abuse has increased over the past few years. The determination of escalating elder abuse, is not known. Incidence research in this field is still an emerging discipline. Until data is complete, the best estimate for incidence of elder abuse are based on the report, Elder Abuse: A Decade of Shame and Inaction, May 1990. "About 5% of the nation's elderly may be victims of abuse from moderate to severe."

The report further suggests that “about one out of every twenty older Americans, or more than 1.5 million persons, may be victims of such abuse each year.” (Rittman, Sept. 1994, p.2)

The Subcommittee on Health and Long-Term Care found that one out of three cases of child abuse is reported. In comparison, one out of every eight cases of elder abuse is reported. (Rittman, Sept. 1994, p.2).

Abuse, neglect, and exploitation are defined and detailed in Chapter 415 of the Florida Statutes, and the Adult Protective Services Policy and Procedure Manual (Dept.of Elder Affairs (1996) pp.3-6) as:

Abuse

The non-accidental infliction of physical or psychological injury or sexual abuse upon a disabled adult or an elderly person by a relative, caregiver, or household member, or an action by any of those persons which could reasonably be expected to result in physical or psychological injury, or sexual abuse of a disabled adult or an elderly person by any person.” “Abuse” also means the active encouragement of any person by a relative, caregiver, or household member to commit an act that inflicts or could reasonably be expected to result in physical or psychological injury to a disabled adult or elderly person.

Neglect

The failure or omission in the part of the caregiver, or disabled adult or an elderly person to provide the care, supervision, and services necessary to maintain the physical and mental health of a disabled adult or an elderly person including but not limited to, food, clothing, medicine, shelter, supervision, and medical services, that a prudent person would consider essential for the well-being of a disabled adult or elderly person. The term neglect, also means the failure of a caregiver to make a reasonable effort to protect a disabled adult or an elderly person from abuse, neglect, or exploitation by others. Neglect is repeated conduct or a single incident of carelessness which produces or could reasonably be expected to result in serious physical or psychological injury or a substantial risk of death.”

Florida Abuse Hotline reports the most frequent type of reported abuse is a self-abuse. Self-abuse occurs when individuals fail to provide for their own needs.

Exploitation

Exploitation means “a person who 1) stands in a position of trust and confidence with a disabled adult or an elderly person and knowingly, by deception or intimidation, obtains or uses or endeavors to obtain or use a disabled adult’s or an elderly person’s funds, assets, or property with the intent to temporarily or permanently deprive a disabled adult or an elderly person of the use, benefit, or possession of the funds, assets, or property for the benefit of someone other than the disabled adult or elderly person; or 2) knows or should know that the disabled adult or elderly person lacks the capacity to consent, and obtains or uses or endeavors to obtain or use, the disabled adult or elderly person’s funds, assets, or property with the intent to temporarily or permanently deprive the disabled adult or elderly person of the use, benefit, or possession of the funds, assets, or property for the benefit of someone other than the disabled adult or elderly person.”

It’s not always easy to recognize abuse or neglect. Most affected people don’t willingly discuss their problem. “Marvin Morck knew his home care aid was no good. He knew he was being mistreated, left unwashed and unattended. He knew he had a supportive family just a call away. And he didn’t say a word.” (Eisier, USA Today, 1996). “Morck’s story says worlds about why abuse, neglect, and theft remain a secret in home health care. Patients almost never report it; outsiders almost never see it.” (Eisier, USA Today, 1995)

In an effort to assist in the recognition of abuse and neglect, the signs and symptoms must be identified. Neglect or abuse can easily be obscured from people who work closely with the elderly. In the article “Failure to Thrive” (Sarkisian, S., Lachs, M. 1996, p.1072), older adults point out that often the family initiates an office visit because they are frustrated by a decline in health care. The signs listed below are important in identifying problems. It is important to remember that some may happen through accidents. The United Home Care Services, Inc. describe sign and symptoms of abuse and neglect as:

General Symptoms

Hunger

Dirty, unkempt appearance

Bedsore

Ragged or long nails

Baby fleas or lice

Matted, dirty hair

Dirty, smelly clothes

Same clothes all the time

Soiled or urine soaked bedding

Evidence of restraints

Obvious illness that requires attention

Untreated injuries

Hair thin as though pulled out; unusual bald spots

Unexplained Bruises

- on the face, lips, mouth, torso, buttocks, limbs
- in various stages of healing
- forming patterns, or shapes of the weapon used such as a belt

Unexplained Fractures

- to the skull, nose or face

- in various stages of healing
- multiple fractures or repeated fractures

Unexplained Burns

- appearing to be made by cigar or cigarette
- a body part appearing to have been put in hot water
- in the shape of objects
- rope or similar burns on arm, neck or torso caused by attempts to tie and restrain
- Symptoms of withdrawal
- Severe hopelessness or helplessness
- Threats of self-harm or suicide

Health or Environmental Dangers

- Home danger due to rotting floors, holes in windows or walls, leaking roof, dangling or exposed wires
- Human and/or animal excrement on floor or furniture
- Obvious fire hazards, such as piles of boxes, newspapers, old clothes, inverted gas heaters, or blocked doors
- Home lacks minimum equipment and facilities (no furniture, no stove, or hotplate, refrigerator, electricity, running water)

Services/Resources

In the State of Florida the responsibility for detection and correction of abuse, neglect, and exploitation is the responsibility of the Adult Services Program. The authority as stated in Florida Statutes Chapter 415 requires that anyone who knows or has reasonable cause to suspect abuse, neglect, or exploitation of an eligible person must report the information to the Florida Abuse Hotline (see Appendix #A).

The Adult Services Program that is governed by the Department of Health and Rehabilitative Services provides various services for the elderly.

Adult Placement Services

HRS counselors provide alternative placement of elders and disabled adults into licensed facilities. The department's goal is to assist individuals in remaining as independent as possible and in the least restrictive setting.

Community Care for Disabled Adults

HRS contract providers provide case management. These services are available to disabled adults between the ages of 18 and 59. Services available are: delivered meals, homemaker, personal care, adult day care, group therapy and chores.

Home Care for Disabled Adults

The Home Care for disabled adults program encourages the person to remain in a family atmosphere. This individual must meet specific financial eligibility criteria and be at risk of being institutionalized.

Supportive Services

This service is available to both the disabled and elderly adults. Services include case management, counseling, information and referral, transportation, financial management and health support.

Further research has shown that the elderly are working hard not to be institutionalized. In an article (Rogers, 1996, p.3) "Neighbor cares for the neglected elderly" depicted a 69-year old man who noticed that his neighbor (80 year-old) was declining in health due to Alzheimer's. "He had become mentally like a 6 year old and he called me 'papa'." The helping neighbor moved his sick friend into his own trailer to assist with daily home living. In their isolation and decline these residents represent all of Florida's invisible elderly, and the trailer park is a microcosm of Florida. Thousands of solitary retirees can no longer cope on their own, but hide their frailties rather than ask for help or risk being placed in an institution."

An Internet search revealed the Commission on Legal Problems of the Elderly. This commission is dedicated to examining the law related concerns of older persons. In 1978, the American Bar Association established the commission to improve legal services for the elderly and has explored issues surrounding long-term care, surrogate decision-making, individual rights, guardianship housing, elder abuse, and other public programs.

In Dade County, the Alliance for Aging is the area agency that is a private non-profit organization. It is part of a nationwide network of 670 area agencies on aging. Agencies such as this exist throughout the State of Florida. These agencies were established by the Older Americans Act that Congress passed in 1965.

The Alliance mission is “to enable older persons to lead meaningful and dignified lives in their communities by providing leadership, direction, and support for a comprehensive continuum of aging and long-term care services.” (Alliance for Aging, Inc.)

Area agencies on aging act as support for elders, caregivers and the general public can inquire about information and assistance.

The funding to promote such activities are primarily grants. (Appendix B)

In late 1996, the Coral Gables Fire Rescue Department was introduced into a project that was designed to provide a bridge or safety net for elders who are vulnerable to abuse, neglect or exploitation. The idea was to link the emergency medical services and essential community based social services. This joint relationship would identify vulnerable elders and intervene before a catastrophe occurred.

“Elder Links” was initially a joint venture between the Alliance for Aging and the Metro Dade Fire Rescue Department. Prior to the development of this program, it was not uncommon for emergency medical crews to provide their elderly patient with personal assistance on their own. In a conversation with Christie Treiber (Metro Dade Fire Rescue, personal interview, April 3, 1998) who was a major contributor to the development of “Elder Links” program, she recalled a disabled veteran patient who frequently called for Metro Dade’s Fire Rescue service. “The man never realized what benefits were available.” He was a paraplegic and the Fire Rescue crews often brought food and even hospital bed urinals. The rescue crew

contacted the appropriate agency and the patient's house was fully retrofitted for wheelchair access.

The following is a description of how the Elder Links program works:

1. Service coordination is initiated when the elder calls "911."
2. The fire and rescue representative conducts an initial assessment and refers the client directly to the Florida Abuse Registry if there is evidence of abuse or neglect.
3. If those conditions are not present but there is a gap in preventive in-home or community-based services, the liaison refers the client the Elder Links Project within one business day.
4. The Elder Links Specialist at the Alliance for Aging contacts the client to verify the information and conducts an intake over the telephone which is used to make the referral to the appropriate social service provider.
5. A full assessment is done by the provider to prioritize assistance based on need and then initiates the services.
6. Follow up is conducted by the Elder Links Specialist to confirm initiation of services, thereby eliminating the vulnerability of abuse, neglect, and exploitation. (See Appendix C.)

PROCEDURES

Analysis

A review of all closed Elder Link referrals from November 1997 to March 1998 was conducted. The data was generated from the Coral Gables Fire Rescue Department and all reporters were Fire Department employees. There was no discrimination towards rank and position. All closed files were considered. (Appendix D)

Fourteen cases were analyzed and specific information was compiled.

Instrumentation

The Elder Link referral form was utilized to retrieve data concerning the initial fire rescue referral. (See Appendix E). The patient outcome and disposition was gathered from data received from the Alliance for the Aging area office (See Appendix F). This update information was received on a monthly basis in the form of a status report.

All raw data was left anonymous. The only identifiable components were the patient's age and sex. The purpose of this analysis was to determine if the program is being utilized by the Coral Gables Fire Rescue Department personnel, and to help identify the services the City of Coral Gables elderly citizens need. Additionally, the analysis attempted to determine if the Coral Gables Fire Rescue Department was successful in their referrals.

ASSUMPTIONS/LIMITATIONS

The first limitation was the size of the analysis. When the program was introduced it was assumed that all employees knew about the program. If the entire Fire Department is familiar with the Elder Link project, additional assumptions can be made. First, the Firefighters are able to identify signs and symptoms of abuse, neglect, and exploitation. Second, if a referral is necessary, it is assumed that all employees will take the appropriate action and complete a referral form. Working with such a small number of referral cases, it also can be assumed that the elderly in Coral Gables are in relatively good condition.

RESULTS

After reviewing the data collected from the closed Elder Link referral cases, several findings were noted.

Profile

Of the fourteen closed cases, the average age of those in need of assistance was 85 years old. Sixty percent (60%) were females and forty percent (40%) were males.

Findings

It was found that ninety three (93%) of the patients were vulnerable to neglect. Seven percent (7%) were discovered to be exploited by a caregiver. Sixty percent (60%) of all patients had a partner living in the home. After the rescue crew completed the medical evaluations, 71% of the patients were left in the home environment.

Possible Services Needed

The patients perceived needs were based on a check list that offered the reporter ten (10) choices. One hundred percent (100%) of the cases reviewed indicated multiple services needed. A calculation from the “possible services needed” revealed the following percentages:

24% - Personal Care

15% - Housing Repair

6% - Adult Day Care

24% - Chores Service

6% - Mental Health Counseling

9% - Meal Delivery

0% - House relocation

6% - Homemaker

0% - Legal Assistance

12% - Other (Transportation 3%; Physical Therapy 3%; Companionship 6%)

Outcome/Disposition

The patients' outcome and disposition revealed that 43% of patients received in-house care assistance. Other figures indicated:

14% - Refused any assistance

14% - Relocated to nursing home

7% - No contact

7% - Referred to other agency

7% - Died prior to being assisted

7% - Home retrofitted for special needs

DISCUSSION

The study results support findings identified throughout the literature review. It was identified that the elderly population can be affected by abuse, neglect or exploitation. The study indicates that the City of Coral Gables does possess elderly citizens that are in need of assistance. This is evident by the total number of cases reviewed. In the fourteen cases reviewed, it was determined by the EMS personnel who responded, that there existed suspicion or confirmed evidence of abuse, neglect, or exploitation.

The 1994 study conducted by the Southeast Florida Center on Aging revealed that the population

segment 85 years of age or older had a greater need for services compared to younger elders. This was confirmed and evident in this study. The average age of patients were 85 years old. In the literature review, an article published in USA Today (“Frightened Victims keep Abuse Secret”) by Peter Eisler revealed that elders often don’t report abuse. This study supports this statement. Seven percent (7%) of the reviewed cases found to be suffering from exploitation. This research was selected to identify this often forgotten population. The Elder Links project is very beneficial for the elderly that get exposed to the fire service. The small number of cases reviewed suggest there are elders that are affected and are not being identified because they remain locked in home environment and are not able to access mainstream society.

When the Elder Links project was first introduced to the Coral Gables Fire Rescue Department, high expectations were raised. It was hoped that, the often heard call at 3 a.m. to assist an elderly person off the floor, would possibly be heard less frequently.

This study also suggests that the elderly in need of assistance, 60% had a partner in the home environment. This finding may suggest that further research is needed to explore if it is a benefit to have a living home partner.

It is vital for the Fire Service to train and update personnel on the use of certain services. The study identified that ninety-three (93%) of the situations found were potential abuse or neglect. Seven percent (7%) was exploitation. The increase percentage of neglect or abuse cases indicate that detection for abuse is easier or merely a greater incidence of occurrence.

In reviewing the study’s findings, the Coral Gables Fire Rescue Department should closely monitor all cases reported. The reporting crews should receive feedback about each case. Training is necessary to assure that all signs and symptoms of abuse, neglect, or exploitation are identifiable. This author interprets

these findings as confirmation that it remains the Fire Service's responsibility to treat non-medical and potential incidences of abuse, neglect or exploitation. This responsibility remains with the Fire Service until the patient gets appropriate assistance.

RECOMMENDATIONS

The purpose of this research paper was to identify the elderly population and review the services that are available to the City's elderly population. The Literature Review and the research analysis both identified the elderly citizens that are in need of assistance.

It is incumbent that the Fire Service recognize the elderly as a customer. They should be integrated into the EMS protocols and procedures.

The success of the Elder Links project can be measured in several ways. One method is through replication. Other cities in the State of Florida have requested guidance to initiate their own Elder Links program. The City of Coral Gables' involvement was greatly influenced by the Metro-Dade Fire Rescue Department. If communities are interested in a similar program, contacting the Alliance for the Aging in the area would be the first step.

Another measurement method is to compare the patients who benefited from their referrals to those who are still in need. Unfortunately the ones still in need are not identified by this study. Perhaps it remains that those who are not in contact with mainstream society are not in need of emergency services. In order to reach more potential patients, it is recommended that other city agencies participate in the Elder Links Project. The Police Department could play a vital role in locating elders in need of assistance. These cases could be greatly influenced by additional referrals.

The City of Coral Gables has established a Senior Services Division. The coordinator of this division, works in cooperation with other City departments to improve the access to services for senior citizens. It is recommended that the Fire Service establish a liaison for dealing with elderly issues. The Fire Service and the Senior Services Division could work together to build a coalition with corporate business in the community. Open meetings with developers could produce some inexpensive, but helpful ideas to prevent the elderly from ever needing EMS:

- knobs on the front of stoves
- fan and light switches on counter tops
- devices to assist wheelchair access

The addition of these features may prevent a patient's health decline and suffering from neglect.

It is recognized that when EMS personnel respond to an emergency, their primary concern is the patient. In addition to the medical treatment, the crew could work towards identifying the home environment. In the study, 71% of patients were left in the home environment. Evidence does exist that the rescue crews are surveying the house for unfit living environments. If the patients are not in need of medical attention, but remain vulnerable to neglect, abuse or exploitation, then a referral must be completed. The study confirms that this procedure is being utilized.

The study as a whole suggests a proactive response. It was determined that prevention programs could be beneficial. The fire service along with other agencies can offer seminars to the elderly that could cover topics such as:

- Fire Prevention
- Fall Prevention

- Smoking Awareness

- First Aid

- CPR

- Nutrition

- Health

These classes should increase the awareness level of the elderly. Perhaps the interaction may bring the unidentifiable elder in contact with those people who could help.

The elderly are not only the customers of the Fire Service, but are also customers of many other agencies and businesses.

Insurance companies could benefit by preventing unnecessary claims. Utilize the various agencies and businesses in sponsoring seminars to educate the elderly.

The Fire Service has a major impact in the community. The image of being a “helpful soul” needs to be justified. Let’s live up to the reputation. Help those people who need it most.

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APPENDIX A

FAX TRANSMITTAL FORM FOR REPORTS OF ABUSE and NEGLECT

Transmittal of this form to the Florida Abuse Hotline is one reporting option. Another option is to call 1 (800) 96-ABUSE, and talk to a Hotline counselor or to leave a message on the Hotline phone mail. The information in this fax will be assessed to see if it meets the legal criteria as a report for investigation. The Florida Abuse Hotline will fax you a response form to verify receipt of your faxed information and advise you of any additional information that is required. Indicate on this form if you do NOT want to be contacted with a follow up fax confirming receipt of your fax. In order to obtain additional information attempts will be made to contact you. It is important to have your telephone number. By law (415, Florida Statutes) your identity will be protected.

ADD EXTRA PAGES WITH MORE FACTS IF THIS FORMAT IS TOO LIMITED IN THE SPACE ALLOWED FOR RESPONDING

Reporter Information

Your Name: _____ Agency: METRO-DADE FIRE RESCUE DEPT.
UNIT: _____ STATION: _____ SHIFT: _____ County: DADE

Today's Date: _____ INCIDENT#: _____

FAX# (305)716-7553 PHONE# (305)716-7654 CONTACT: MON-FRI 8:00am-5:00pm

Indicate if you want a faxed response form verifying receipt of this fax: (X) Yes () No

Victim Identifying Information

| NAMES | DOB | RACE/SEX | HOME ADDRESS | PHONE |
|-------|-------|----------|--------------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

DIRECTIONS TO VICTIM'S LOCATION: _____

FOR ADULT VICTIM ONLY — DESCRIBE DISABILITY & HOW VICTIM IS IMPAIRED IN THE ABILITY TO CARE FOR OR PROTECT SELF: _____

Other Household Members

| NAMES | DOB | RACE/SEX | RELATIONSHIP TO VICTIMS |
|-------|-------|----------|-------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Significant Others

| NAMES | RELATIONSHIP | ADDRESS | HOME PHONE | WORK PHONE |
|-------|--------------|---------|------------|------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Description of Incident

Describe injuries or threat of injuries: _____

Date of last incident and for how long has maltreatment occurred: _____

Describe concern for protection of victims: _____

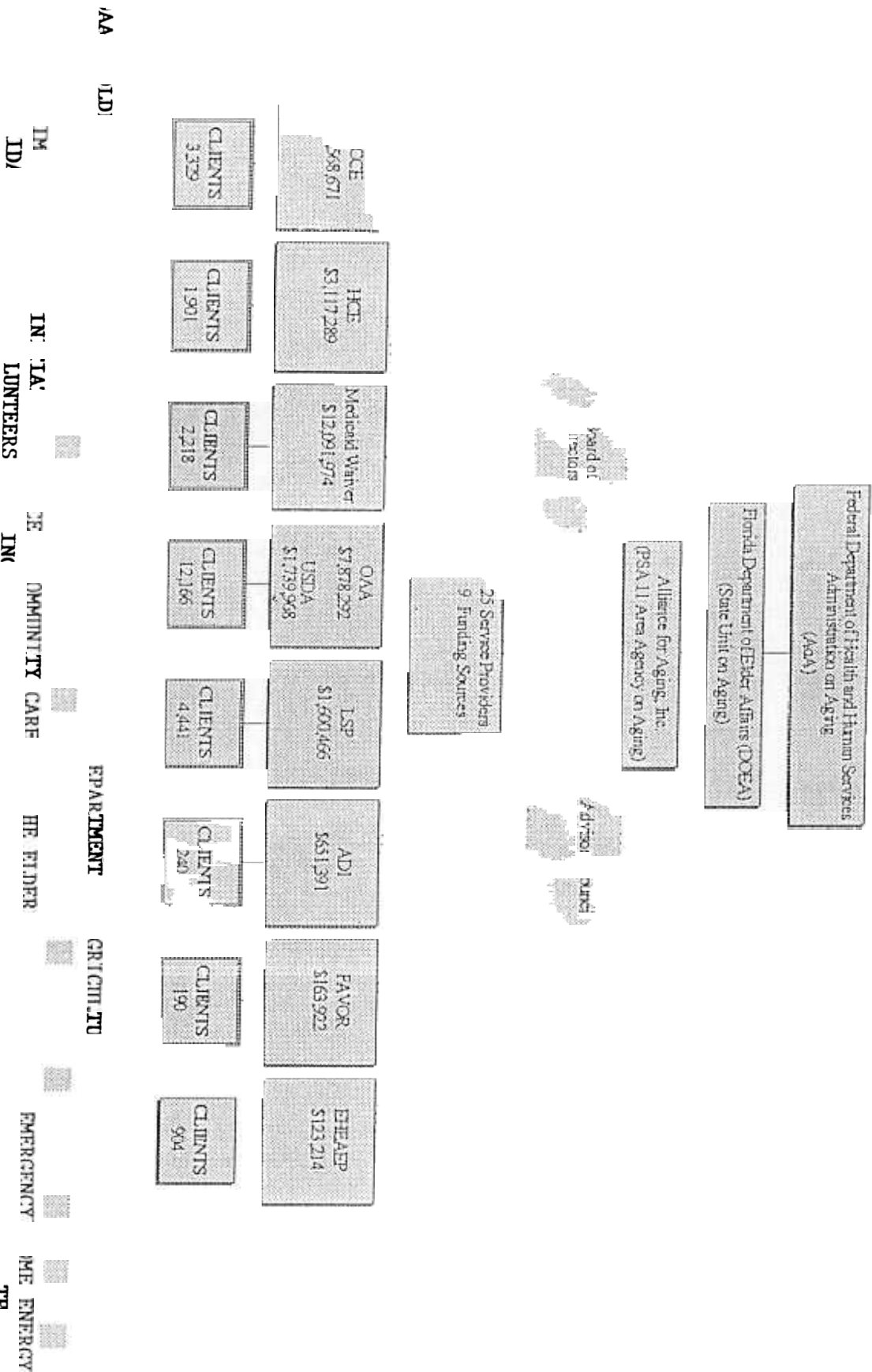
Identify others who might be aware of the abuse/neglect/exploitation of the victim:

| NAMES | HOME ADDRESS | HOME PHONE | WORK PHONE |
|-------|--------------|------------|------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

APPENDIX B

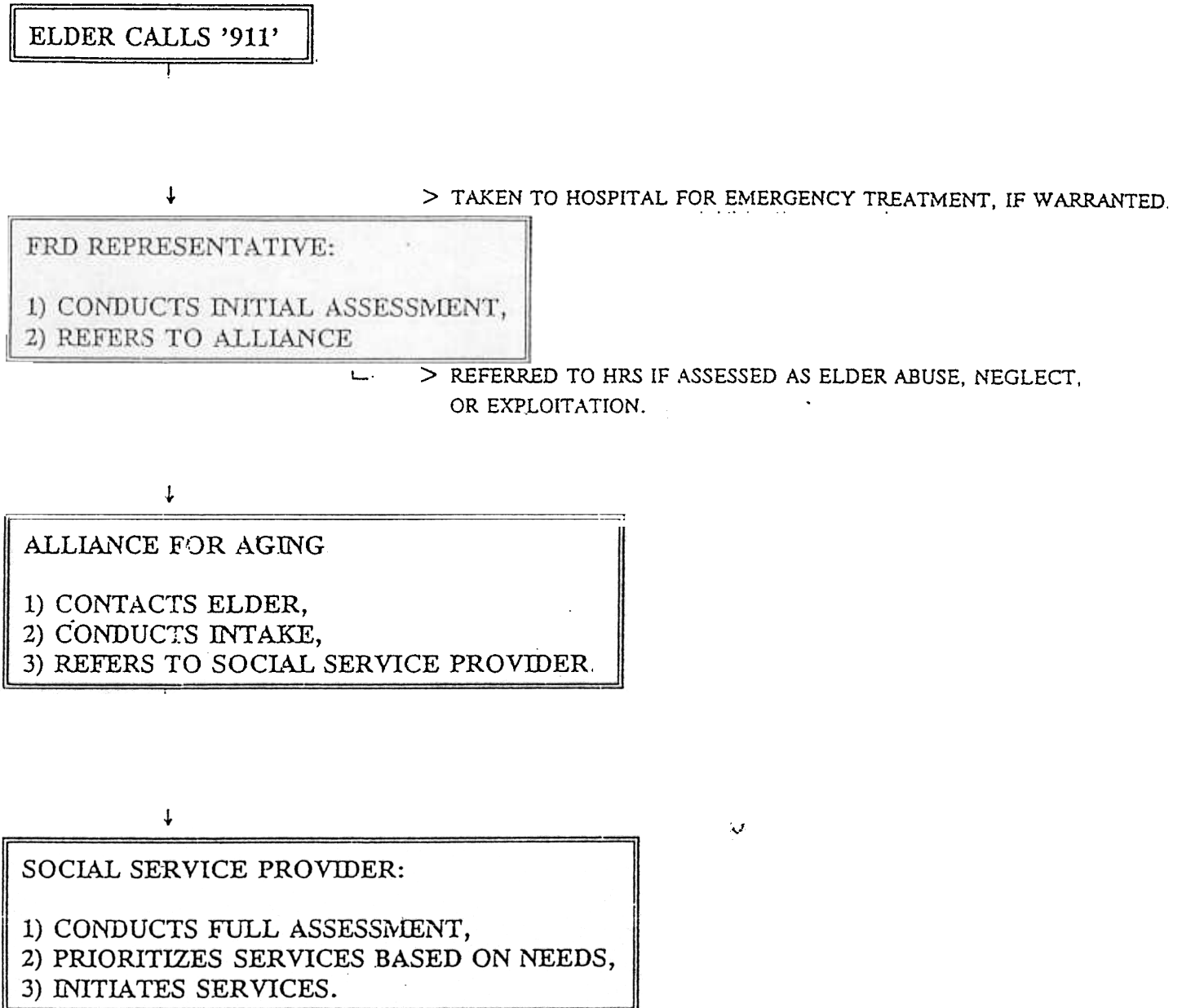
The Aging Network

The Aging Network is a network of organizations that provide services to the elderly.



APPENDIX C

FLOW-CHART OF SERVICE INTERVENTION
UNDER THE ELDER-LINKS PROJECT:



APPENDIX D

APPENDIX D

| AGE M/F | PARTNER | FINDINGS | | | NEEDS | OUTCOME | LEFT IN HOME |
|---------|--------------|----------|----------------------|--------------|---|--|-----------------|
| | | ABUSE | NEGLECT | EXPLOITATION | | | |
| 77 F | No | | Vulnerable Neg. | | Personal Care | -Temporary in-house care | Yes |
| 98 F | Yes/daughter | | Vulnerable Neg. | | Personal Care Adult Day Care Chores Service | | Yes |
| 60 F | No | | Vulnerable Neg. | | Personal Care Transportation | In home service | Yes |
| 89 M | Yes | | Vulnerable Neg. | | Personal Care House repair Chores Service Meal Delivery Homemaker | In home support Patient died | Yes |
| 55 M | N/A | | Vulnerable Neg. | | Chores Service | Referred to Agency age related | Unknown |
| 75 F | No | | Potential vulnerable | | Mental health counselling Chores Service House repair Personal Care | Refused service Help get phone | Yes |
| 69 M | Yes | | Potential vulnerable | | Meals Home repair Personal Care Physical Therapy | Patient died while being processed two weeks after referral | No/ER transport |
| | Yes | | Potential vulnerable | | Mental health counselling | 24-hour private help hired | Yes |
| 86 wife | Yes | | Potential vulnerable | | Personal Care | Services united home care services | Yes |

| | | | | | | | | |
|----|---|--------------------------------------|--------------------------|----------------------|--|---|---|---------|
| 85 | F | Yes | Possible abuse caregiver | | *Money to caregiver daughter seen sign off | Personal Care House Repair Chores Service | Nursing home placement | Yes |
| 92 | M | Yes 2 referrals 2 months apart | | Potential vulnerable | | Adult care Chores Service | Moved up State of Florida with family 1)Hospital no action; refused assistance. 2)2nd referral needs patient moved before action. | Unknown |
| 76 | M | No | | Potential vulnerable | | Chores Service Adult Care Home repair | Hospital admission Home retrofitted | No |
| 76 | F | Yes | | Potential vulnerable | | Chores Service | No contact | Yes |

APPENDIX E

**CORAL GABLES FIRE DEPARTMENT
ELDER-LINKS REFERRAL FORM
FAX: 670-6534
PHONE: 670-5556**

REPORTER INFORMATION:

Incident # _____
 Your Name _____ Today's Date _____
 Station _____ Unit _____ Shift _____

PATIENT INFORMATION:

Name _____ Male _____ Female _____
 Address _____ City: _____
 Phone Number: _____ Social Security # _____
 Date of Birth _____ Age _____ iving alone? Yes _____ No _____

REASON FOR REFERRAL:

Presenting problem _____

POSSIBLE SERVICES NEEDED:

Personal Care

Meal Delivery

Housing Repair

Housing Reloaction

Adult Day Care

Homemaker

Chore Services

Legal Assistance

Mental Health Counseling

Other _____

Left in home environment ? Yes _____ No _____

Hospital Transported to _____

APPENDIX F

ALLIANCE FOR AGING, INC.
ELDER LINKS PROGRAM
9500 South Dadeland Boulevard, Suite 400
Miami, Florida 33156
(305) 670-5556

To: Capt. Mark Stolzenberg
Coral Gables Fire/Rescue Dept.

From: Irene Fiallo
Elder Links Specialist

Subject: Update on client for the month of: _____ 199

Referral sent by: _____ On: __/__/

Station: _____ Unit: _____ Shift: _____

Thank you for your referral of: _____

The following has been done to provide assistance: _____

[The page contains faint horizontal lines, suggesting it was part of a lined notebook or document.]

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